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CONFIRMATION NO. 5473

<b>SERIAL NUMBER</b> 10/566,451	<b>FILING or 371(c) DATE</b> 02/14/2007 <b>RULE</b>	<b>CLASS</b> 370	<b>GROUP ART UNIT</b> 2419	<b>ATTORNEY DOCKET NO.</b> 11345/099001		
<b>APPLICANTS</b> Olivier Condemine, Paris, FRANCE; <b>** CONTINUING DATA *****</b> This application is a 371 of PCT/EP04/51621 07/27/2004 <b>** FOREIGN APPLICATIONS *****</b> <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 04/14/2007						
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and Acknowledged <u>/CHUONG T HO/</u> Examiner's Signature		<input type="checkbox"/> Met after Allowance Initials	<b>STATE OR COUNTRY</b> FRANCE	<b>SHEETS DRAWINGS</b> 1	<b>TOTAL CLAIMS</b> 13	<b>INDEPENDENT CLAIMS</b> 3
<b>ADDRESS</b> OSHA LIANG L.L.P. TWO HOUSTON CENTER 909 FANNIN, SUITE 3500 HOUSTON, TX 77010 UNITED STATES						
<b>TITLE</b> Transmission protocol automatic detection method for a portable object such as a chip card or a chip key						
<b>FILING FEE RECEIVED</b> 1030	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit			